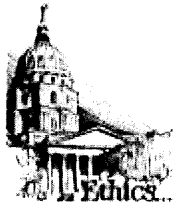


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**Campaign Finance
Appointment of Treasurer or
Candidate Committee Form
For Candidate For State Office**

Governmental Ethics Commission
901 S. Kansas Avenue
Topeka, KS 66612
Phone (785) 296-4219
Fax (785) 296-2548
ethics.kansas.gov

This is an (Check one) ☐ Initial Appointment ☒ Amended Statement

Candidate Candidate Name: **Kim Webb**

Address: **3937 S. Eisenhower Ct.**

Address2:

City: **Wichita** Zip: **67215**

Home Phone: **(316) 519-2819** Business Phone: Cell Phone:

County: **Sedgwick** Email Address: **kimwebbforkansas@gmail.com**

Office Sought: **State Representative** District No.: **97**

Treasurer Date Appointed: **07/07/2021**

Treasurer Name: **Kim Webb**

Address: **3937 S. Eisenhower Ct.**

Address2:

City: **Wichita** State: **KS** Zip: **67215**

Home Telephone: **(316) 519-2819** Business Phone: Cell Phone:

Email Address: **kimwebbforkansas@gmail.com**

Candidate Date Appointed:

Committee Chairperson's Name:

Address:

Address2:

City: State: Zip:

Home Telephone: Business Phone: Cell Phone:

Email Address:

Date Appointed:

Treasurer's Name:

Address:

Address2:

City: State: Zip:

Home Telephone: Business Phone: Cell Phone:

Email Address:

I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor.

Executed on:

Date: **7/7/2021 9:36:00 AM** Signature of Candidate: **Kim Webb**

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